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**\*BIBDATASHEET\*****CONFIRMATION NO. 1594**

Bib Data Sheet

|                             |                                       |              |                        |                                       |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER<br>10/707,595 | FILING DATE<br>12/23/2003<br><br>RULE | CLASS<br>264 | GROUP ART UNIT<br>1732 | ATTORNEY<br>DOCKET NO.<br>LC 0141 PUS |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/250,294 06/20/2003  
 which is a CIP of 10/249,237 03/25/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

**\*\* 03/05/2004**

|  |                           |                        |                      |                            |
|--|---------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>MI | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>9 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                           |                        |                      |                            |
| Verified and<br>Acknowledged   | Examiner's Signature      | Initials               |                      |                            |

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**TITLE**

PLASTIC INJECTION MOLDING WITH MOVEABLE MOLD MEMBERS FORMING SPEAKER GRILL

|                 |   |  |
|-----------------|---|--|
| FILING FEE      | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees  |
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